

**FORM 4A. GROSS MISDEMEANOR
CHARGING BY TAB CHARGE**

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
_____ JUDICIAL DISTRICT

State of Minnesota,

Plaintiff,

vs.

**TAB CHARGE PURSUANT TO
MINN. R. CRIM. P. 4.02, SUBD. 5(3)**

Defendant.

To: _____ County District Court and _____ County Jail

From: Arresting Officer: (Please Print) _____ Badge Number: _____

Pursuant to Minnesota Rules of Criminal Procedure 4.02, subd. 5(3), the above-named officer hereby requests that the named defendant be processed for the designated Gross Misdemeanor (GM) indicated below and as defined by Minnesota Rules of Criminal Procedure 1.04 (b).

Defendant Name: _____ **DOB:** ____/____/____
Driver's License No. _____ **State:** _____ **Date of Offense:** ____/____/____
City of Occurrence: _____ **Controlling Agency:** MN - _____
Control Number/ICR: _____ **Court File No. (Provided by Court/Jail):** _____

(Check Boxes)	<u>Designated GM Offense</u>	<u>Charge</u>	<u>Penalty (must check one)</u>		<u>MOC</u>
			<u>2nd Degree (E)</u>	<u>3rd Degree (F)</u>	<u>Circle E or F</u>
<input type="checkbox"/>	UI Alcohol	169A.20, 1(1)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__501 E F
<input type="checkbox"/>	UI Controlled Substance	169A.20, 1(2)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__601 E F
<input type="checkbox"/>	UI Hazardous Substance	169A.20, 1(3)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__H01 E F
<input type="checkbox"/>	UI Combination	169A.20, 1(4)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__G01 E F
<input type="checkbox"/>	Alcohol .08 or More Within 2 Hours of Driving	169A.20, 1(5)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__W01 E F
<input type="checkbox"/>	Alcohol .04 or More Within 2 Hours of Driving - Commercial Vehicle	169A.20, 1(6)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__K01 E F
<input type="checkbox"/>	Schedule I or II Controlled Substance	169A.20, 1(7)	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__S01 E F
<input type="checkbox"/>	Refusal to Submit To Test	169A.20, 2	<input type="checkbox"/> 169A.25	<input type="checkbox"/> 169A.26	J__R01 E F
<input type="checkbox"/>	Other (specify): _____				

Court Status: (Check One)

- ☐ Defendant incarcerated in _____ County Jail to be held in custody pending court appearance.
☐ Defendant released on his/her own recognizance and assigned the following court date.
Date: ____/____/____ Time: _____
Location: _____ County Courthouse
Address: _____

Bail/Bond Status: (Check One) Date: ____/____/____

- ☐ Maximum \$12,000 bail under Minn. Stat. § 629.471 or conditional release under Minn. Stat. § 169A.44.
☐ Bail was posted in the amount of \$ _____.
☐ Bond was posted in the amount of \$ _____.
☐ No bail/bond was required.

Dated: ____/____/____

Officer's signature

Officer's Name and Badge Number
(if different from arresting officer)